POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	_Pa_	Jc 4cv	c2-20-c1
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
— (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Claim		Date
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Claim		Date
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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